

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM 10-01)**

SERIAL **217347**

EXPIRATION DATE
12-21-99

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	NO.	DEC.	NO.	DEC.	NO.	DEC.
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7/23/30